1:Herskovits & Herskovits E-5 (1928-1929) 1934
SR8 Bush Negroes SR8
Saramacca

574
609 In the doorway of one of the huts, a woman squatted over a fire, and at her feet a child sat busying itself with pushing the firewood toward the center. Our cook had planted two forked sticks in the ground, and on them had hung our lanterns, so that we could see the woman silhouetted against the fire and the naked child on the ground singing the seketi which Bayo had sung for us so many [533] times on the river. Over and over the child tried the air, her mother humming it for her softly, while from the doorway of another house a man sat watching them. We had not noticed him until the lanterns had come. The planting [291] ground at harvest time is not a place a man frequents. He was a strange figure there on his low stool, as he sat wrapped to his neck in a large striped cloth. He made not the slightest move, uttered not a single word. But for his cough, he might have been a corpse propped up in the doorway. We stood hesitating whether to cross the short distance between us and the fire to greet the woman and the man, but before we could come close enough to them to speak, we heard Bayo calling us in a voice we had never heard him use in a strange village.

"Bak'a, Bak'a. Come. They want you inside." When we were out of earshot of the woman at the fire, he said in a whisper, "Do not go over to those houses. Tomorrow when we are away from here, I will tell you why. It is for that I called you."

We had no need, however, to puzzle over Bayo's warning. [164] Our cook, who had heard the conversation of the men, told us that the man in the doorway was a leper.

753
262 "You know how it happens, Massa? Among us townspeople it is this way. A child inherits a *trefu* from his father. It is one thing, or many things, he must not eat. If he eats what he should not, then he sickens. We know a person who has eaten his trefu by the spots that come out on his skin. If a man goes on eating the things which are his trefu, then the spots become worse and worse. He becomes a leper. So that's how it is."

He did not at once answer the questions we put to him.

1:Herskovits & Herskovits E-5 (1928-1929) 1934
SR8 Bush Negroes SR8
Saramacca

856 to all the medicine we had for them—he took it upon him-
644 self to instruct them to wash the bottles carefully, as he
609 followed us to the storehouse, and to warn them that what was given was not to be taken internally.

"*A taki, a taki-e, u' no mu' bebe*—He says, he is saying, you must not drink this," he explained, with something of his mother's persuasiveness in giving instructions.

His grandmother had said one day half in jest that he would have a tiger spirit which would need to be reckoned with when he grew to manhood. He was a straight-limbed, wiry child, not troubled with the umbilical hernia so often [164] met with in children here in the bush, or with the distended "cassava belly."

[857] The coming of the strangers had eclipsed all desire for familiar diversions here. From early morning the children of the village stood about watching us, so that the brushing of teeth and the lacing of boots were carried on under excited supervision which continued day after day. But to this small grandson of Yankuso we were visitors in his quarter, and whether we were alone in the council house or were in the small house reserved for privacy, he would find his way there and stand about asking questions.

Sometimes, however, when he found us at work and saw that we did not wish to be interrupted, he would lean against the wall for a long time watching us in silence, until presently he would come to life, as it were, walk over to the table, and begin beating the Kromanti rhythm on it.

856 But he was not the only child who knew the drum
533 rhythms. In the last village in the Pikien Rio, we met a
868 two-year-old child who came to us with more than usual readiness and followed us about, his hand in ours until we came to his mother's house, where he left us to sit down on a wooden plank which lay near it. We had been in conversation with the older people and did not notice his going, until all at once we heard the slow beating of the rhythm to the Sky God. It was this child of two, drumming against the plank on which he sat.

Ii Herskovits & Herskovits E-5 (1928-1929) 1934
SR8 Bush Negroes SR8
Saramacca

anything made of iron—nor can a gun shoot him, nor an arrow pierce him. If he goes through a thicket of thorns or climbs a thorny palm tree when the spirit comes to him, he is not harmed. That is Kromanti."

"How much does a person pay an obia man for giving a boy Kromanti?" we asked.

"It costs plenty, white man. But a good obia man never asks too much. If a man says he will give the boy Kromanti, for not too many guilders, then we know he will do it. But if a man asks forty, fifty, then we know he is not an honest man, and he is not a good man. I have heard, though, of a good obia man who took as much as twenty-four guilders, but he gave the boy a strong Kromanti spirit, and it took much time to teach him."

3

From time to time members of Bayo's family visited our camp. Each time we were introduced to a new brother, or father, or *suwagi*—brother-in-law. Among these visitors was a man whose name we never learned, though we had talked with him a good deal. He was, we later came to know, a man who knew obia. He was a scholar among his people, a thoughtful man who often went about alone, instead of being accompanied by a fellow clan member or a member of his family, as is customary among these people. Like Bayo, he had an incest kunu, and at his age, he had already had occasion to see what kunu planned for him. He coughed badly. When men went to cut timber, he could not go with them because of his cough and the fever which went with the cough.

"Have you been to a good obia man?" we asked him.

He smiled. Of what use to go from one diviner to the next, from one man who had special magic to another, when a man knew that what was troubling him was kunu?

"Come to the city with us," we said, when we knew him better, "and we will take you to a doctor. He may be able to do something for you."

2: Kahn D-5 (1922-1930) 1931
SR8 Bush Negroes SR8

We took particular pains to gather as much information as possible on fecundity, infant mortality, and the death-rate of mothers in childbirth. Sixty women were questioned. The fecundity we found to be variable; one of the women claimed to have borne twelve children—the highest number encountered—and some had no offspring at all. The usual number of children was found to be two or three. Interestingly enough, there is a low infant mortality; that is to say, a low death-rate for infants during the first six months after birth, but a high child mortality. The higher death-rate occurs among children from the ages of two to six years. There seemed to be a considerable number of premature births, and deaths of mothers at the time of birth or shortly thereafter are numerous. After much questioning, we found this to be one of the grievances of the Djukas, for they consider the Dutch medical authorities could do a great deal in alleviating such a condition. The precautions surrounding the mother at the time of childbirth or shortly thereafter are very crude and they may lead to infections and end in death by puerperal sepsis.

The birth of a child is usually the occasion for some slight celebration. The umbilical cord is severed with a knife (unsterilized, of course) and buried behind the hut. The placenta is thrown into the river. *Trismus neonatorum,* a tetanus infection by way of the umbilical cord, occasionally occurs, due to the extremely unclean conditions surrounding parturition. As can be seen from the photographs, some of the Djuka children suffer from umbilical hernia, because the cord is

2: Kahn D-5 (1922-1930) 1931
SR8 Bush Negroes SR8

844 not severed gently enough. During the nursing period it is
[853] often customary for the mother to abstain from intercourse, and judging by the size of the nursing children this period may last for two years.

854 The children are carried in the West African manner, astride on their mothers' backs and held by a band of wide cloth that goes around both mother and child. This is unlike the local Indian custom, in which the squaws carry their offspring on their hips. The children are washed often, being bathed several times a day beside the river; they stand and gurgle as the water is being poured over them.

842 The number of births among the Djukas is not as great
847 as might be inferred from their promiscuity. This suggests, of course, that some means of contraception is practised. In one village on the Saramacca River a medicine man showed the bahkra a yellow berry, an infusion of which is supposed to have abortive properties; it is known among the natives of British Guiana as "Doctor Doolittle." We doubt that the infusion has any such properties as are assigned to it. We also heard that the Djukas practice mechanical abortion, but their crude instruments must make this very dangerous.

854 Excepting during the first two or three years of the children's lives, mothers actually have little to do with their care. There are usually several older children in the family, sisters, brothers, or cousins, to whom is relegated the care of the
351 younger ones. Besides their ordinary names, children are also called according to the day of the week on which they were born, such as Monday-child, Tuesday-child, and so on.

2: Kahn D-5 (1922-1930) 1931
SR8 Bush Negroes SR8

● 164 The Djukas suffer from a number of diseases also common among white men. Yaws, a syphilis-like disease, caused by infection with *Spironema pertenue,* is frequently found among them. Individuals may be seen suffering from all three stages of it. Malaria, including the severe tropical form, is spread by the mosquitoes along the rivers. An ulcerous condition known as leishmaniasis, the result of infection by Leishman-Donovan bodies, is an ordinary occurrence, as is hookworm. The Town Negroes are occasionally infected with filariasis and schistosomyasis of the rectal type. Leprosy is present in the town of Paramaribo, but we saw none of it in the bush.

648 The Djukas do not fear to take the bahkra's medicine. The 757 gratitude of more than one mother was earned when we gave [515] her child castor oil. Of the principle of asepsis, naturally, the [304] Djukas know nothing. Their incisions for making *cutty-cutty* (ornamental scars) are septic enough to give a bacteriologist nightmares.

On one occasion, snakee-kutti, the snake protector, did not work, and a Bush Negro, who had been bitten was taken to the hospital at Moengo. His leg had gone untreated for five days and was in the serious stage of gangrene. The limb was amputated by the doctor in charge and the Djuka made an uneventful recovery. He would not have been brought to the hospital by his family if there had been anything more for the Bush Negro medicine man to do. But there was not, and they went to the bahkra as the last resort to save his life.

778 Far up the Surinam River is the sacred medicine city of 756 Dahomey (pronounced Daumay). Into its sacred precincts

/20 cont./

262 milk. She does eat cheese, however, saying that there is absolutely no milk in it.

/21/ Chapter XIII

Diseases, Afflictions, and so forth

• 164 The greatest affliction among them, too, is the lepra boasi (leprosy and elephantiasis Fuchs), venereal diseases, leg and body 757 pains, and sores. They cure themselves mainly with herbs, which they possess in great quantities and with which they frequently work with special success. They cut open abcesses themselves; in most cases they cup themselves, making the cups from small calabashes. [824] For many pains they rub themselves with spirits steeped in paradise seed (1) and with carapa oil, which they get from the carapa nuts (2).

1. Sem. paradisie Ningre kondre pepre from the Amomum paradise Afsel.

2. Carapa gujanens Obl.

755 In difficult cases and dangerous illnesses, however, they ask for advice from the Cromantie gado, which can only be done by means of song and dance, on which occasion a great deal is drunk. [756] A wentie man (African idol-priest or priestess) qualified for this, or an influential person, is able by means of drink, song, and dance among the others to excite himself to such an extent that in a mad way, without consciousness of what he is doing, he makes superhuman leaps, turnings, and twistings with his body, jumps and dances in the fire, until he finally falls to the ground unconscious and, rolling like a tub, foaming at the mouth, utters the most repulsive and strange sounds, which lasts until he is finally put down somewhere for dead. So long as he remains lying without any movement or sound as if in a deep sleep, one may absolutely not come near him or touch him, but must always take care to keep out of his way in his course and not to hinder him in anything.

B /513/
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146 The scarcity of lipide foods,and, among the Boni, the low consumption of fruit might cause one to fear vitamin deficiencies.
B In fact, there are no signs of it.
R
515 Body hygiene is excellent; Blacks and Indians bathe several times a day and are very fastidious about their persons.
B
R In summary, there is no appreciable difference in the custom-
433 ary activities, agriculture, hunting, and fishing, of the two popu-
B lations. There is one in economic activity. Among the Boni,
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461 who have a greater need for imported objects, the adult men work
[465] for wages four to five months per year on the average. These jobs are very laborious and performed under bad dietary conditions, whereas the Indians rest when they are not occupied with their customary tasks, sometimes spending entire days stretched out
B in the hammock.
R
177 The two populations have been in close contact for a long
B time. The Indian villages farthest downstream have immediate
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177 contact with the first crop plantings of the Boni. Without having
648 any tendency to merge (their characters and their customs are too different), Boni and Oayana have maintained regular relations since the end of the eighteenth century, doing a little trade in imported articles exchanged for hammocks and dogs trained for hunting. They often visit each other, and nothing stops the spread of
B illness from the one group to the other.
R
105 In fact, the way of life of the two groups is the same, the
182 environmental conditions have the same influence, and the differ-
● 164 ences which are observed in the pathology can only be attributed to a different sensitivity with regard to the principal illnesses.

B
164 Pathology of the Boni. We shall briefly summarize here the ob-
[114] servations of Dr. A. Sausse in his work Populations primitives du Maroni.

The pathology of the Boni is characterized by:

-- a resistance to malaria, which means that if the children have bad attacks an immunity will develop with age; the size of the spleen diminishes regularly from child to adult. The adults have only episodical attacks which are not serious; in particular

B /513 cont./

● 164 the birth rate of the Boni is scarcely influenced by malaria. This is an essential difference between Blacks and Indians.

This immunity, regarded as an hereditary characteristic of the African Blacks, was well known by the Europeans of past centuries. In the seventeenth and eighteenth centuries it was thought that on account of this fact only the African Blacks could furnish a regular force in tropical countries. This is one of the principal causes of the slave trade.

/514/ -- An important impairment by skin affections. The Boni, before the creation of the Maripasoula medical center, showed many cases of pian, which attacked most of the children, leaving infirmities and widespread incapacities in certain adults.

Also observed were numerous cases of American forest cutaneous leishmaniasis (pian-bois), involving ulcers, sometimes very widespread, almost always infected, and able to lead to a terminal cachexia. Finally, 1% of the Boni manifested cases of leprosy in the course of development. The total incidence of the disease was estimated in 1957 at approximately 3%.

B [842] [161] -- An important invasion of venereal diseases, notably of blennorrhagia, leading to the sterility of a large number of women and stopping the demographic increase.

This aspect of the pathology seems in keeping with the very free morals of the Boni and the instability of their unions.

In 1948 the Boni attributed an important part of the infant mortality to a form of meningitis which they call "pikin nenge siki," "the sickness of the little Blacks"; the symptoms described seem to fit cerebrospinal meningitis.

R 164 114 Pathology of the Oayana Indians. Doctor Douvier, examining the Oayana in 1937, wrote: "The Indian does not show sores like the Negro; the Indian has epidemics."

Doctors who have examined the Indians of the interior in the course of recent years have made agreeing observations on their pathology, which can be summarized thus:

R 164 -- the Indians, in contrast to the Blacks, suffer severely from malaria; no immunity appears among adults, who are more severely attacked than children. The size of the spleen in most cases simply increases in the course of life.

The beliefs of both, attributing illnesses to
/516 cont./

B R .743 648 [753] supernatural causes, did not predispose them to turn to European doctors. Moreover, the Saint-Laurent hospital was so far away (six days paddling downstream) that a seriously ill person had plenty of time to die en route. The Boni went there only as a last resource and in general at the point of death. As for the Oayana, not a single one presented himself there before 1950.

B R 744 648 [743] In 1936-1939 several circuits had been made from the post of La Forestière located at the mouth of the river, but no consistent medical action had been feasible. Not until 1949 was it possible to create a medical center in the country itself, at Maripasoula. The populations were visited regularly, and the seriously ill could ● [164] be hospitalized on the spot. At the same time systematic spraying with DDT inside all the huts, destroying the anthropophile anopheles, changed the environmental conditions considerably; if malaria has not disappeared, it has ceased, both among the Indians and among the Boni children, to be the principal cause of morbidity.

B R 743 744 648 [484] [753] The action of the medical center has been exercised more on the Boni, who live a few hours by canoe from Maripasoula, than on the Oayana. Among the latter, the principal villages are two days journey by motorboat upstream amidst difficult waterfalls; the Indians are often on the move, fishing on the upper courses of the rivers or visiting their relatives on Brazilian rivers; it has happened several times that the circuits of the doctors and medical attendants (one per trimester on the average) do not find anybody in the villages; incidentally, the Oayana tend to attribute all internal ailments to magical causes, consulting willingly only for wounds. They willingly accept the remedies given on the spot, but rarely take the initiative of moving a sick person to Maripasoula; the women continue to have their babies delivered in the villages, without any hygiene.

R R [844] 757 165 Only during the last three or four years has a change in attitude been noticeable among them vis-à-vis medicine; as we shall show below, no notable modification in their mortality has yet been observed as a result of this fact.

B R 121 165 The principal interest of this study being to compare the demographic data of two populations before they had been modified

/519 cont./

128 Fertility. We have classed the women, according to the year of
163 birth, into four categories, for fertility has varied considerably in the course of time. The study has been made by five-year age-blocks. The table below /see p. 16 / shows the cumulative fertility (total of figures obtained for the various age-blocks from 15 to 50 years of age). For the women of categories three and four, the number obtained is the result of an extrapolation.

842 Among the Boni there is no custom leading to a diminution of fertility, and the voluntary restriction of births is unknown.

163 The vertical fall of fertility between categories one and
164 two results from the invasion of venereal diseases, which seems
[177] to have coincided with the period (1920) when the search for the balata brought into the interior a heavy traffic of adventurers
[831] accompanied by numerous prostitutes. The very free morals of the Boni favor the propagation of the illness, which, since that time, has not ceased its ravages, stemmed only, but not eliminated, by the medical effort of these last years.

5: Harault--21 K, E-5 (1948-1959) 1959 SR8 Bush Negroes SR8

/524/

161 [128] (173) [613] Thus during the period 1895 to 1925, the Boni population doubled with each generation. These results are confirmed by the study of the genealogies. The present-day Boni, with the exception of about 5% of them who belong to recently founded lineages, are descended by known filiation from seven women who lived at the end of the eighteenth century.

It is possible that before the period to which this inquiry refers epidemics were produced and struck certain villages in particular, destroying entire lineages. In fact we cannot say anything certain about the evolution of the population before 1890. Let us only remember that this rate of reproduction of 200% per generation of 31 years represents the normal rate for the Refugee Blacks, in the absence of large epidemics and of venereal diseases and before any medical aid.

During the period 1925-1942, the Boni population did not vary (rate of reproduction $\frac{105}{100}$).

Since 1940, it has been increasing slightly, by 25% per 27 years, that is just under 1% per year.

163 165 Birth rate and mortality rate. Demographic balance. From 1 January 1956 to 31 December 1957, i.e., in two years, 39 children were born in the villages on the French bank (660 persons), and 21 persons died (including 5 children born during this period).

Rate of birth: 2.9% per year.

Rate of mortality: 1.6% per year.

161 Rate of increase: 1.3% per year.

The rate of increase of 1.3%, which corresponds incidentally to the theoretical calculation indicated above, is very much below that of the population of Cayenne and of the communes of the coast. If one considers that before 1920 it reached the remarkable value of 3% per year, one realizes the extent of the disaster brought about by venereal diseases.

[164]

5: Hurault--22 K,E-5 (1948-1959) 1959 SR8 Bush Negroes SR8
Rucuyen SR12

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165 Factors influencing the demographic characteristics of the Boni. Life expectancy at birth for the Boni is not only 12 years higher than that of the Indians, but is also considerably higher than that of the African peoples from which they came.

This fact can be attributed to two causes:

• 164 182 1. The Boni live in a more salubrious environment than the African forest and have better living conditions. It seems likely that the Guianese forest, apart from malaria, presents few causes of bad health and is relatively favorable to man; the absence of trypanosomiasis permits men /525/ to gather on the banks of the large rivers, generously exposed to the air and to the light. The small number of the Boni and their dispersion over a vast territory stands in the way of the transmission of diseases by drinking water. In fact the water is generally healthy. Dysentery and parasitosis are considerably rarer and less serious than in Africa;

14 162 2. The Boni are a selected population. This is a very important aspect of their demography.

The slaves were the object of a systematic selection; the purchasing commissions of the rich colony of Surinam allowed only individuals of good health and constitution to pass. A second selection took place at the time of the formation of the tribes of Refugee Blacks. More than from a massive rebellion the rebel groups increased in size by the addition of those who, from year to year, escaped at the peril of their lives. Without any doubt those who preferred combat to servitude were the most vigorous and bravest. Voluntary migrations have always been a factor of selection: one may suppose that a migration which took place in such circumstances was accompanied by a particularly rigorous selection which, in spite of the time which has passed (eight generations), continues to influence the physiological [734] characteristics of the Refugee Blacks. Notably it can explain [157] the vigorous constitution of the Boni (there are only two congenital invalids out of 810 persons) and their exceptional qualities of physical courage and initiative.

/6 cont./

824 wood is too hard to be worked with ordinary instruments or, on the contrary, because it is too soft, too easily attacked by insects, or
311 has a tendency to rot. The zone exploitable by native procedures is limited (for the floodable zones /7/ do not allow fine woods) to the slope of the hills bordering the valley of the watercourses accessible to pirogues; beyond, the cartage of felled trunks becomes impracticable.

139 A very dense epiphytic vegetation connects the trees with
136 their upper parts; it is there that life blossoms out: flowers, birds, insects, and monkeys.

484 Progress through the forest is very arduous. The undergrowth,
480 shrubs, bushes, bound together by fine and elastic lianas, offers
[132] a constant obstacle, the machete /sabre/ must be wielded at each
[412] step. The nature of the terrain, a succession of bogs and hills
[133] with steep and slippery slopes, makes walking for heavily loaded men exhausting. On the trail one succeeds with difficulty in making more than 15 to 20 kilometers a day; in the uninhabited forest one can scarcely advance five to six kilometers a day by cutting the strict minimum as one does when hunting. The opening of a route permitting the passage of heavily laden men cannot progress more than three kilometers a day on the average.

139 The great forest offers few real dangers, but it is an environ-
182 ment profoundly hostile to man, which does not present spontaneously any food resource and allows establishment of villages and cultivated areas only at the price of great efforts.

136 One meets few animals in the interior of the forest, and the resources for hunting are very limited; on the other hand, there are few harmful animals; wild beasts are few and practically do not appear; snakes are much rarer than on the coast and represent
● 164 only a slight danger. The most real dangers of the forest come from the fall of branches and epiphytes, principally when it is cleared for cultivation; each year there are accidents of this kind in Boni country. Besides, work in the forest is the occasion for many wounds which tend to ulcerate.

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132 [513] The climate is relatively temperate and easy for the European to stand. In the forest the thermometer does not rise to more than 28° during the hot hours, to go back down to 21° at the end of the night: everyone sleeps with a blanket, Refugee Blacks and Creoles as well as Europeans. Humidity is very great during nearly all the year; precipitation averages three meters a year or about 50 centimeters less than at Cayenne. The year is divided into two seasons: "summer" from July to December, and the rainy season the rest of the year, with a maximum of precipitation in 133 May and June. The water level varies considerably in the course 182 of the year (several meters). The populations of the interior, [361] spaced out along the rivers, suit the rhythm of their lives to the [164] height of the water; the water rules transportation, fishing, and crops; moreover, a certain number of illnesses are in close relation to the rains, in particular those which have an insect for vector.

241 [134] Almost everywhere the soil is very poor in organic matter and fundamental ingredients, very waterlogged necessitating the practice of an itinerant agriculture on burned-over areas; the period of fallow ground varies from two to ten years, the optimum seem- [136] ing to be about six. The inhabitants of Guiana cannot allow ground to lie fallow regularly because of the ravages of the manioc ant, /8/ which is active especially in habitually cultivated zones. [134] Vain and costly efforts made by Europeans notably at Saint-Jean du Maroni about 1950, have shown that the fertility of lands not [242] burned over is practically nil. The Indians and the Refugee Blacks consider that the fertility of the soil depends exclusively on the weight of cinders laid down during the burning.

When burned-over areas are cultivated, only one harvest is obtained; but this harvest is abundant, and the soil thus utilized can be regarded as relatively fertile. The knocking down and burning do not require great labor, so that primitive agricultural methods 241 can be considered to give a good yield. As a matter of fact, the 199 diverse populations of Guiana, Creoles and Refugee Blacks, have entirely adopted the methods of work resulting from the millennial

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whom African blood predominates are seen; the mulattoes are in general traders, or practice small stock raising.

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The Refugee Blacks are the only population of interior Guiana who can be regarded as perfectly adapted to the environment and capable of subsisting there by their own means. They

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have a protection against malaria which operates thus: If the children suffer from this endemic disease, resistance appears with age, protecting adults from its attacks.

They are subject to serious skin diseases, notably to pian, but these maladies have few demographic consequences; only the

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[161]

Boni are seriously attacked by venereal diseases. The Djuka are in the process of very great demographic expansion.

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The strong tribal organization of these populations and their solid implantation on the ground render effective their methods of working, farming, hunting, and fishing, which assure them not only excellent provisionment but considerable means of exchange and a material standard of living superior to that of most of the populations of Africa. The techniques of the Refugee Blacks, especially as regards the squaring of wood, sawing, and building, procure for them resources comparable to those which the populations of the Ivory Coast get from coffee and cacao. /blank page/

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613 /26 cont./
[62] This village had no future. its complement did nothing but
[591] melt away for half a century, especially under the influence of
[177] venereal diseases.
[164]

Neither time nor geographical separation have brought on scission on the religious or legal planes. In this respect the members of Dipélu I and Dipélu II continue to think of one another as
[784] the same lineage. They remain subject to the same kunu.

6/3 The law of exogamy continues to be applied rigorously with-
6/4 in Dipélu I and within Dipélu II, but marriages are permitted be-
582 tween Dipélu I and II. There are no longer any social sanctions about this, and the common origin of the two groups is so remote that they scarcely think any more of applying to them the term
[784] pikadu. But such unions remain exceptional, the people concerned continuing to fear a superhuman sanction.

[621] No element of heterogeneous origin, fragment paternally related or refugee outsiders, has settled among the Dipélu.

613 The Papaïston or Kawina lineage (Papaïston village) has
[621] remained perfectly coherent and well grouped. Its members know their genealogy as far back as an ancestress named Térésa, who must have lived at the beginning of the 18th century. But there exists a small fraction, nearly extinct, which we shall designate as Papaïston 2, which presents a separate genealogy going almost
[614] as far back in time. Nobody knows the origin of this group exactly; it is regarded as connected by kinship ties to the main group, but
[784] the members of the two groups consider that they form two distinct bee. They do not have the same kunu.
[582]

Marriage is not tolerated within the principal group, but it is allowed between members of the two groups.

613 Moreover, with the Papaïston lives a small group which
621 fled from Surinam about the end of the 19th century, originally
[167] of the Bakabuchi tribe. This group has no kinship tie at all with
[101] the Papaïston but has placed itself under the authority of the head

787 /212 cont./
531 can read these messages; but we have not turned up any precise evidence on this subject (1).

1. These signs are very little systematized and have no relation whatever with the symbolic designs which figure in certain rituals of possession, especially in Dahomey and Haiti. It is permitted to see in them a simple likeness.

787 The Papa gadu are chiefly consulted to ask them to re-
[255] veal the cause of misfortunes that happen. One of them is not
[253] asked to cure an illness unless the interrogation reveals that it brought it on.

776 The worship of the Papa gadu snake gods makes a strong
648 impression on the West Indian Creoles who maintain regular relations with the Refugee Blacks. Most consider it as diabolical
[782] in nature and disapprove of it, but if the presence of an "adder"
[171] (anaconda snake) is noted in a neighboring creek, and if at the same time misfortunes occur, it happens that a Creole may go to ask the Refugee Blacks to practice rites to mollify
[778] the vengeance of the god. We have happened to catch sight of, hidden in a copse behind the habitation of a gold miner, a small altar decorated with blue and red pennants, the usual place of worship of the Papa gadu.

755 Observation in Boniville, November, 1952.
[787] An Asisi woman, Tini, comes to Boniville to consult her adoptive daughter Pamasa, about 35 years old, who is possessed by a Papa gadu named Adawa. Féni, 15 years old,
[164] Tini's son, has been sick for several days (fever, eruption all over the body). When someone comes to get us, the god has already entered into Pamasa, has sat down in a hut, and

/212 cont./

755 is answering in ordinary language the questions posed. The sick
[753] boy's mother asks the god if it is really he who made her son
[784] ill. He answers that it is he and gives two reasons: first, a
-824] week before, Féni damaged with a blow of the machete the root of a silk-cotton tree in which precisely he himself was living; moreover, his sister Pamasa was sick for 15 days, he did not go to visit her.

The mother begs the god: "Ubegi yu, yu abi leti, gi ɛŋ paadɔ, a 'ã be sabi bū-bū. (We beg you, you are right (but) pardon him, he had not realized well /what he did/.)"

Then the god directs a treatment: an infusion of a certain number of leaves, with which the sick boy will wash his body. It states that the sick boy will quickly get well.

Pamasa then comes back to her ordinary state. The scene has lasted about three-quarters of an hour in all.

• 164 Observation in Asisi, October, 1956.

On October 21 at 8 o'clock I am told that Bugi, a woman of about 45, is gravely ill; she suffers from violent pains in the chest and a general tremor. The sick woman is stretched out on the ground, supported by her brother and surrounded by old women who are comforting her. She appears to suffer atrociously, her body is covered with sweat, her lower limbs are agitated with an incessant trembling; she presents the symptoms of a
755 heart attack (2). In front of the house, the ɔbiaman are

2. Bugi had already been hospitalized in Maripasoula for a heart attack.

preparing a "remedy," /213/ for they suspect that this is a question of a manifestation of the Papa gadu of which Bugi is the bearer.

/213 cont./

755 A stalk of sãŋgaafu twice bent in an elbow is arranged on the ground. A cross is traced in the dirt.

Centered on the cross is placed a large basin into which is poured infusions of leaves taken from several calabashes.

The sick woman, still prostrate and groaning, is seated on a stool facing the basin. The contents of the basin are poured slowly over her body while she is massaged. It is not a question of a remedy in the literal sense of the word; the sick one is "washed" to help the god to manifest itself in her.

I notice that while going back into the hut she trembles almost no more; the attack seems to be subsiding.

In the meanwhile someone comes to call me elsewhere and I cannot come back until half an hour later. I find the sick woman standing, smeared with pɛmba, in the middle of a [787] meditative audience. The god has descended into her and is expressing itself in Papa language while she dances with slow gestures.

[753] [784] I am told that it has just given the explanation of the illness: it struck Bugi because she did not observe the kina given to all bearers of Papa gadu, to stay away from funeral ceremonies. Now, the day before yesterday, she had knowingly participated in the tukka dance around Kotoïda's coffin.

The ɔbiaman present beg the god to pardon, which it does after claiming a bottle of beer which it drinks through the mouth of its bearer.

152 Observation in Kormotibo, December 18, 1957.

164 On December 18 in the evening I find the village of
753 Kormotibo in the clutches of terror. Several persons are sick
784 from the effect of the kunu. Apaita, a young woman, has an enormous whitlow, following an accident; two women have been stricken with pneumonia.

/249 cont./

751 [787] Possession by a Kumẽnti gives, they say, invulnerability during the time of the trance, but in his ordinary state the individual remains vulnerable (they say only that in case of danger the gita "rises" immediately).

Someone who has a man nẽŋga ɔbia has no trances of possession, but they state that he is permanently invulnerable (except for breaking of the kina). In order to obtain this ɔbia one must have himself "washed" for a very long time by an elder who knows the leaves in question. He delivers them already crushed so that no one may be able to know this secret outside of the son or nephew to whom he bequeaths it.

It is necessary to continue to be washed four times a year for 15 days each time, to keep up the force of the ɔbia.

[515] During these 15 days one bathes three times a day, in secret (in principle nobody knows that you have this ɔbia).
[834] During these periods one must have no relation with a woman, even to talk to her.

They state that someone who has a man nẽŋge ɔbia can be struck by blows of a machete and even receive a gunshot with impunity.

[173] They believe that this ɔbia, in the past called man feti ɔbia, was obtained by the ancestors at the time of the wars against the whites; still today it inspires an unshakeable confidence. /250/ In October, 1952 we saw M..., a man of 45 [164] [752] with great good sense, make a deep gash in his leg while cutting a liana, in spite of his ɔbia. Doubt did not cross his mind for a second: he told us that certainly he had unknowingly eaten something contrary to the kina of the ɔbia. Since we were working near some villages, he went immediately to find the master of the remedy to have the power restored. For nothing in the world would he have left for a long round of work in the bush with the feeling that he was at the mercy of an accident.

/273 cont./

*539 mother." Comrades, they suffered from pian (1)! All together

• [164]

1. Skin disease from which most Refugee Black children used to suffer.

they entered the ɔbia house. Again: "Whips, why are you so handsome?"

(same formula)

Viop! viop! Anansi ran, he shut the door; he said: "Let me see, whips, strike so that I may see!" viop! viop!

(Somebody in the audience) "Wénon was inside?" -- "Wénon was inside!" (laughs). The whips hit them until their skin was bloody, their pian pimples cut, so that the blood flowed over them.

(cruel laughs from the audience)

Then Anansi opened the door and they fled.

The end.

4) Anansi and the Bat

Anansi was looking for someone to go with him to a festival which was taking place in a neighboring village... because the more who come, the more they give you to eat. He asked the bat, who said to him: "I haven't been to a festival for a long time. I'll go on the day you wish." The day they had set arrived. They started out; they walked until they had arrived near the village. Anansi said: "Comrade bat, see this lebi weko (2). If I begin to shout: "My belly,

[824]
[278]

2. Lebi weko: bougouni (Inga alba) tree whose bark is used in the native pharmacopoeia.